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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY, NEWARK DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in	a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Kinga First name Paulina Middle name	First name Middle name			
	Bring your picture identification to your meetin with the trustee.	Spiedach	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0720				

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Debtor 1 Sniadach, Kinga Paulina

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	559 Littleton Rd Parsippany, NJ 07054-4801 Number, Street, City, State & ZIP Code Morris	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	County If Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
).	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Sniadach, Kinga Paulina

Case number (if known)

Par	Tell the Court About	our Ba	ankruptcy Cas	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	Chapter 7								
		□ с	hapter 11							
		□ с	hapter 12							
		□ cı	hapter 13							
8.	How you will pay the fee	•	about how you	u may pay. Typica	ally, if you are paying the fee your	with the clerk's office in your local court for more details self, you may pay with cash, cashier's check, or money orcattorney may pay with a credit card or check with a	er.			
		_	pre-printed ad	ddress.						
					he fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The tallments (Official Form 103A).					
			I request that	t my fee be waiv o, waive your fee,	yed (You may request this option and may do so only if your incom	only if you are filing for Chapter 7. By law, a judge may, bu e is less than 150% of the official poverty line that applies	to			
					able to pay the fee in installments ee <i>Waived</i> (Official Form 103B)	 If you choose this option, you must fill out the Application and file it with your petition. 	7			
9.	Have you filed for	■ No								
	bankruptcy within the last 8 years?	□ Ye								
			District		When	Case number				
			District		When	Case number				
			District		When	Case number				
10.	Are any bankruptcy cases	■ No)							
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.							
			Debtor			Relationship to you				
			District		When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
11.	Do you rent your	■ No	Go to li	ine 12.						
	residence?	☐ Ye	s. Has yo	ur landlord obtai	ned an eviction judgment agains	t you?				
				No. Go to line 1	2.					
				Yes. Fill out <i>Initia</i> bankruptcy petiti		udgment Against You (Form 101A) and file it as part of this	;			

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Debtor 1 Sniadach, Kinga Paulina Page 4 01 42 Case number (if known)

ar	t3: Report About Any Bus	sinesses \	ou Own	as a Sole Proprieto	r			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.					
		☐ Yes.	Name	and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, State	e & ZIP Code			
	to this petition.		Check	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chap	ter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		I1, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	Have Any	Hazardoı	us Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable		What is t	he hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Sniadach, Kinga Paulina Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Sniadach, Kinga Paulina		Case number (if known)

	Answer These Question	JIS TOF KE							
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		siness debts? Business debts are debts or through the operation of the business or i					
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you ow	e that are not consumer debts or business	debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exempt proper e to distribute to unsecured creditors?	rty is excluded and administrative expenses are				
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000	☐ 25,001-50,000				
	you estimate that you owe?	□ 50-99		<u></u> 5001-10,000	<u> </u>				
		100-1		1 0,001-25,000	☐ More than100,000				
		200-9	99						
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		□ \$500,0	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion				
		□ \$500,001 - \$1 million □ \$100,000,001 - \$500 million □ More than \$50 billion							
Par	t7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	relief in accordance with the cl	hapter of title 11, United States Code, spe	ecified in this petition.				
		case can			property by fraud in connection with a bankruptcy . 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		Kinga F	Paulina Sniadach e of Debtor 1	Signature of Debt	or 2				
		Executed	on August 6, 2019	Executed on					
			MM / DD / YYYY	MI	M / DD / YYYY				

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Debtor 1 Sniadach, Kinga Paulina

Bar number & State

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Steven A. Serna	Date	August 6, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Steven A. Serna			
Printed name			
Law Offices of Steven A. Serna, LLC			
Firm name			
5300 Bergenline Ave Ste 300			
West New York, NJ 07093-5616			
Number, Street, City, State & ZIP Code			
Cantast phase (204) 202 0202	Email address	hk@sormanag som	
Contact phone (201) 392-0303	- Email address	bk@sernaesq.com	
29402002 NJ			

	Fill in this in	nformation to	identify your case		CUMENT his filing:	Page 8 of 42				
Debto		Kinga Paulii	na Sniadach	Name		Last Name				
Debto (Spous	or 2 _	First Name		Name		Last Name				
Unite	d States Bankru	uptcy Court for	the: DISTRICT	OF NE	W JERSEY,	NEWARK DIVISION				
Case	number					_			☐ Check if this is ar amended filing	
_	cial Form	_	-							
<u>Sc</u>	hedule .	A/B: P	roperty						12/15	
think it inform Answe	t fits best. Be as ation. If more spa er every question	complete and a ace is needed, a	accurate as possible attach a separate sh	e. If two leet to the	married peo his form. On	If an asset fits in more thar ple are filing together, both the top of any additional p Own or Have an Interest In	n are equally re ages, write you	sponsible for su	pplying correct	
	No. Go to Part 2.		ultable lilterest ill al	ny resid	zence, bunun	g, land, or similar property	y :			
1.1				Wha	at is the prope	erty? Check all that apply				
	559 Littleton	Rd			Single-fam				aims or exemptions. Put ed claims on Schedule D:	
-	Street address, if ava	ailable, or other des	scription		J Condomini	multi-unit building um or cooperative	Credito	Creditors Who Have Claims Secured by P.		
				_	_	red or mobile home	Curren	t value of the	Current value of the	
_	Parsippany	NJ	07054-4801		-		entire _l	property?	portion you own?	
	City	State	ZIP Code		T imeshare			\$312,000.00 be the nature of y	\$312,000.00 your ownership interest	
				Who	Debtor 1 or	•	one a life e	as fee simple, ten state), if known. Simple	nancy by the entireties, or	
-	County	nty			At least one	nd Debtor 2 only e of the debtors and another n you wish to add about th	neck if this is community property se instructions) s local			
				prop	,	ation number.				

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

Debtor 1	Sniadach K	inga Paulina	Document	Page 9 c	of 42 Case number	(if known)	
			d other recreational vehicl	os other vehic		·	
			ercraft, fishing vessels, snov			:5	
■ No							
☐ Yes							
			n for all of your entries from			r pages	\$0.00
		nal and Household It		an itama?			Current value of the
Do you ov	vn or nave any le	egai or equitable int	erest in any of the following	ng items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	old goods and fu						olaline et exempliene.
Exampi No	les: Major appliand	ces, furniture, linens,	china, kitchenware				
	Describe						
		Household furr	iture & furnishings				\$3,000.00
□ No	les: Televisions an	· · · · · · · · · · · · · · · · · · ·	o, stereo, and digital equipme ledia players, games	ent; computers,	printers, scanners; m	usic collection	s; electronic devices
■ res.	Describe	Electronic appl	iances			٦	\$750.00
■ No □ Yes. 9. Equipm Exampl ■ No □ Yes. 10. Firearr Exampl ■ No	collections, m Describe ent for sports an les: Sports, photog instruments Describe	nemorabilia, collectib ad hobbies graphic, exercise, and	rints, or other artwork; books les I other hobby equipment; bic ion, and related equipment	ycles, pool table			
□ No		thes, furs, leather coa	ats, designer wear, shoes, ad	ccessories		_	
		Clothes, shoes	& accessories				\$500.00
□ No		velry, costume jewelry	, engagement rings, weddin	g rings, heirloon	n jewelry, watches, ge	ems, gold, silve	er
. 55.		Jewelry and wa	tches				\$300.00
		, , , , , , , , , , , , , , , , , , , ,				_	

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13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

D	ebtor 1	Sniadach, Kinga Paulina	Docume	nt	Page 10	of 42 _c	ase number (if know	n)	
	_	Describe					,	′ —	
14.	. Any ot ■ No	her personal and household items you	ı did not already	list, i	ncluding any l	health aid	s you did not list		
	☐ Yes.	Give specific information							
15		the dollar value of all of your entries fr 3. Write that number here	•	_	•	pages yo	u have attached fo	r	\$4,550.00
Pa	art 4: De	escribe Your Financial Assets							
D	o you ov	wn or have any legal or equitable interd	est in any of the	follow	ring?			 	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	ples: Money you have in your wallet, in you	,		it box, and on h	hand when	you file your petition		
17.		its of money poles: Checking, savings, or other financial institutions. If you have multiple acc					unions, brokerage h	ouses, ar	nd other similar
			Inst	itution	name:				
		17.1. Checking	Account TD	Bank	(\$1,700.00
18.	Examp ■ No	, mutual funds, or publicly traded stocoles: Bond funds, investment accounts wi	th brokerage firms	s, mon	ey market acco	ounts			
19.	. Non-pı	ublicly traded stock and interests in in venture	corporated and u	uninco	orporated bus	sinesses, i	ncluding an interes	st in an L	LC, partnership, and
	■ No								
	☐ Yes.	Give specific information about them Name of entity:					% of ownership:		
20.	Negot Non-n	nment and corporate bonds and other iable instruments include personal checks regotiable instruments are those you cannot	, cashiers' checks	s, pron	nissory notes, a	and money			
	■ No	Give specific information about them							
		Issuer name:							
21.		ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift	savinç	gs accounts, o	r other per	sion or profit-sharin	ıg plans	
	■ Yes.	List each account separately. Type of account: 401(k) or Similar			name: D1K Plan				\$138,390.00
22.	Your s	ty deposits and prepayments thare of all unused deposits you have mad ples: Agreements with landlords, prepaid i						ies, or oth	ers
			Inst	itution	name or indivi	idual:			
23.	Annuit	ies (A contract for a periodic payment of r	money to you, eith	er for l	ife or for a num	nber of yea	rs)		

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Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 Sniadach, Kinga Paulina ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No The second secon 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 Sniadach, Kinga Paulina 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$140,090.00 Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$312,000.00 Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$4,550.00 Part 4: Total financial assets, line 36 \$140,090.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$144,640.00 Copy personal property total \$144,640.00 Total of all property on Schedule A/B. Add line 55 + line 62 \$456,640.00

Official Form 106A/B Schedule A/B: Property page 5

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		Docume	nt Page 13 of 42	
Fill in th	is information to identi	fy your case:		
Debtor 1	Kinga Paulina Sı	niadach		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JEE	RSEY, NEWARK DIVISION	
Case number (if known)				☐ Check if this is an
				amended filing
Official Fo	orm 106C			

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Pro	perty You (Claim as Exem _l	ρt
---------	------------------	-------------	----------------------------	----

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Household furniture & furnishings Line from Schedule A/B 6.1	\$3,000.00		\$3,000.00	11 USC § 522(d)(3)	
Ellie Holli Schedule A/L G. I			100% of fair market value, up to any applicable statutory limit		
Electronic appliances Line from Schedule A/B 7.1	\$750.00		\$750.00	11 USC § 522(d)(3)	
Line non Schedule A/L 1.1			100% of fair market value, up to any applicable statutory limit		
Clothes, shoes & accessories	\$500.00	•	\$500.00	11 USC § 522(d)(3)	
Ente non ochequie A/B TTT			100% of fair market value, up to any applicable statutory limit		
Jewelry and watches Line from Schedule A/B 12.1	\$300.00		\$300.00	11 USC § 522(d)(4)	
Line nom Schedule A/L 12.1			100% of fair market value, up to any applicable statutory limit		
TD Bank Line from Schedule A/B 17.1	\$1,700.00		\$1,700.00	11 USC § 522(d)(5)	
Line nom Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit		

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
Copy the value from Check only one box for Schedule A/B		eck only one box for each exemption.			
G.I.A. 401K Plan Line from Schedule A/B 21.1	\$138,390.00		\$680.42	11 USC § 522(d)(12)	
Line Holl Schedule A/L 21.1	100% of fair market value, up to any applicable statutory limit				
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No			on or after the date of adjustment.)		
Yes. Did you acquire the property covere	d by the exemption within	1,21	5 days before you filed this case?		

3.

Yes

Case 19-25244-SLN			tered 08/06/19 1	17:54:09 De	sc Main
Fill in this information to iden	Document	Page	5 of 42		
Fill in this information to iden	tily your case.				
Debtor 1 Kinga Paulina S	Sniadach Middle Name	Last Name		.	
Debtor 2	Middle Name	Lastiname			
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY,	, NEWARK D	DIVISION		
Case number					
(if known)				☐ Che	ck if this is an
				ame	ended filing
Official Form 106D					
	Who Hove Claims	Coour	nd by Dranart		4045
Schedule D: Creditors	who have Claims	Secure	ed by Propert	<u>y</u>	12/15
Be as complete and accurate as possible. needed, copy the Additional Page, fill it ou known).					
1. Do any creditors have claims secured by	y your property?				
☐ No. Check this box and submit th	is form to the court with your other s	schedules. Yo	ou have nothing else to re	port on this form.	
Yes. Fill in all of the information b	elow.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has a for each claim. If more than one creditor has much as possible, list the claims in alphabeti	a particular claim, list the other creditor	rs in Part 2. As	Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
	· ·		value of collateral.	claim	If any
2.1 Loancare Servicing Ctr Creditor's Name	Describe the property that secures		\$319,132.00	\$312,000.00	<u>\$7,132.00</u>
Attn: Bankruptcy	559 Littleton Rd, Parsippar 07054-4801	iy, NJ			
780 Lynnhaven Pkwy Ste					
375	As of the date you file, the claim is apply.	: Check all that			
Virginia Beach, VA 23452-7332	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as	mortgage or s	ecured		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	First Mor	tgage		
Date debt was incurred 2018-05	Last 4 digits of account num	nber <u>937</u> 1	<u> </u>		
Add the dollar value of your entries in Co	lumn A on this page. Write that numb	er here:	\$319,132	2.00	
If this is the last page of your form, add th	. •		\$319,132		
Write that number here:			ψ010,102		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0430 13 202++ 021	Docur	ment Page 1	6 of 42	_	JCSO WAIT
Fill i	n this information to identify y	our case:				
Debtor	1 Kinga Paulina S	Sniadach				
	First Name	Middle Name	Last Name)	
Debtor : (Spouse if		Middle Name	Last Name			
(Spouse ii	, illing) i list Name	wildule Name	Last Name			
United S	States Bankruptcy Court for the:	DISTRICT OF NEW	JERSEY, NEWARK DI	√ISION		
Case ni	umber					
(if known)					_	check if this is an
					a	mended filing
Officia	al Form 106E/F					
	dule E/F: Creditors	Who Have Unse	cured Claims			12/15
ny exec Schedule D: Credit he Conti	mplete and accurate as possible. utory contracts or unexpired leas G: Executory Contracts and Une ors Who Have Claims Secured by inuation Page to this page. If you inder (if known).	es that could result in a cla xpired Leases (Official For Property. If more space is nave no information to repo	im. Also list executory com m 106G). Do not include a needed, copy the Part yo	ontracts on Schedule A/B: any creditors with partially a u need, fill it out, number th	Property (Officiand secured claims the entries in the	I Form 106A/B) and on that are listed in Schedule boxes on the left. Attach
Part 1:						
_	any creditors have priority unsecu	red claims against you?				
-	No. Go to Part 2.					
	res.					
Part 2:	List All of Your NONPRIOR	ITY Unsecured Claims				
3. Do a	any creditors have nonpriority uns		1?			
_	No. You have nothing to report in this	-		dules		
		part. Cubilit tills form to the	booth with your other some	udico.		
	res.					
unse	all of your nonpriority unsecured ecured claim, list the creditor separa one creditor holds a particular claim	ely for each claim. For each	claim listed, identify what ty	pe of claim it is. Do not list cl	laims already incl	uded in Part 1. If more
۷.						Total claim
4.1	Bank of America	Last 4 di	igits of account number	0177		\$16,791.00
·····	Nonpriority Creditor's Name		.9.10 0. 40004	0111		Ψ10,731.00
	4000 Coverses Cir	When wa	as the debt incurred?	2013-10		-
	4909 Savarese Cir Tampa, FL 33634-2413					
	Number Street City State Zip Code	As of the	e date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check or	e.				
	Debtor 1 only	☐ Conti	ngent			
	Debtor 2 only	☐ Unliq	uidated			
	Debtor 1 and Debtor 2 only	☐ Dispu	ıted			
	\square At least one of the debtors and	211011101	NONPRIORITY unsecured	d claim:		
	Check if this claim is for a co					
	debt Is the claim subject to offset?		ations arising out of a sepa priority claims	ration agreement or divorce t	that you did not	
	No		•	g plans, and other similar del	hts	
	■ No □ Yes		r Specify Revolving		~	
	i res	■ Other	r Specify NEVUIVIIIU	account		

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Page 17 of 42 Case number (f known) Debtor 1 Sniadach, Kinga Paulina 4.2 \$10,131.00 **Bank of America** Last 4 digits of account number 5381 Nonpriority Creditor's Name When was the debt incurred? 2014-05 4909 Savarese Cir Tampa, FL 33634-2413 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.3 **Chase Card** Last 4 digits of account number 9697 \$21,270.00 Nonpriority Creditor's Name Attn: Legal Dept When was the debt incurred? 2017-05 1455 Valley Rd Wayne, NJ 07470-2089 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Revolving account 4.4 Syncb/tjx Cos Dc Last 4 digits of account number \$11,402.00 5318 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? 2016-06 PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Revolving account

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Case number (f known) Document Debtor 1 Sniadach, Kinga Paulina 4.5 \$28,530.00 TD Bank N.A. Last 4 digits of account number 6516 Nonpriority Creditor's Name When was the debt incurred? 2018-10 32 Chestnut St Lewiston, ME 04240-7744 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal line of credit ☐ Yes 4.6 Last 4 digits of account number \$7,634.00 Valley National Bank 5062 Nonpriority Creditor's Name Attn: Legal Dept When was the debt incurred? 2018-08 1455 Valley Rd Wayne, NJ 07470-2089 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Deficiency for repossessed vehicle Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** 6a. **Domestic support obligations** 6a. 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 6d. 0.00

from Part 2

Official Form 106 E/F

Total claims

6e.

6f.

6g.

6h.

0.00

0.00

0.00

0.00

Total Claim

6f.

6g.

6h.

Student loans

Total Priority. Add lines 6a through 6d.

you did not report as priority claims

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Sniadach, Kinga Paulina

6j.

6i.	Other. Add all other nonpriority unsecured claims. Write that amount
	here.

95,758.00 \$

Total Nonpriority. Add lines 6f through 6i.

95,758.00

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			III FAUE / U UI 4/	
Fill in th	nis information to identi	fy your case:		
Debtor 1	Kinga Paulina Sr	niadach		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JEF	RSEY, NEWARK DIVISION	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property(Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Ford Motor Credit Comp PO Box 542000 Omaha, NE 68154-8000	Installment account opened 11/1/2017 for 2017 Ford Escape Credit Limit: \$12,603.00, Remaining Balance: \$6,301.00

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Fil	II in this information to identi	fy your case:			
Debtor 1	Kinga Paulina S	niadach			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	-				
United Sta	tes Bankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY, NEWARK DIVISIO	<u>DN</u>	
Case num	ber				
(if known)				☐ Check if this is a	n
				amended filing	
Officia	l Form 106H				
	lule H: Your Cod	obtore			10/45
Scried	iule n. Toul Cou	EDIOI 2			12/15
are filing to and numbe case numb	ogether, both are equally res	ponsible for supplying con the left. Attach the Addition question.	rect information. If mor onal Page to this page.	omplete and accurate as possible. If two married e space is needed, copy the Additional Page, fill On the top of any Additional Pages, write your named a codebtor.	it out,
`	,	, , , , ,	·		
■ No					
☐ Yes	;				
	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada			(Community property states and territories include Wisconsin.)	Arizona,
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spou	se, or legal equivalent live wi	th you at the time?		
line 2	again as a codebtor only if the Schedule E/F (Official Form	nat person is a guarantor o	or cosigner. Make sure	your spouse is filing with you. List the person sl you have listed the creditor on Schedule D (Offic Schedule D, Schedule E/F, or Schedule G to fill	cial Form
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
3.1				☐ Schedule D, line	
	Name			Schedule E/F. line	
				☐ Schedule G, line	
-	Number Street			-	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			-	

State

City

ZIP Code

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Fill	in this information to identify your ca	se:							
Del	otor 1 Kinga Paulin	a Sniadach							
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the:	DISTRICT OF NEW .	JERSEY, NEWARK	DIVISION	_				
	se number nown)		-			☐ A supp	ended filing lement shov	wing postpetition	chapter 13
\bigcirc	fficial Form 106l							ollowing date:	
_	chedule I: Your Inco	me				MM / E	D/ YYYY		12/15
sup spo atta	as complete and accurate as possil plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O The complete and accurate as possil plying to the complete as possil plying to the complete and accurate as possil plying to the complete accurate and accurate accurate and accurate accurate and accurate accura	re married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse is de informa	livin ation	ng with you, in about your s	clude infor pouse. If m	rmation about y nore space is ne	our eeded,
1.	Fill in your employment information.		Debtor 1			Deb	or 2 or nor	n-filing spouse	
á	If you have more than one job, attach a separate page with information about additional	Empleyment status	■ Employed				☐ Employed		
		Employment status	☐ Not employed				ot employe	ed	
	employers.	Occupation	gemologist						
	Include part-time, seasonal, or self-employed work.	Employer's name	Gemological II America	nstitute (of				
	Occupation may include student or homemaker, if it applies.	Employer's address	5345 Armada Dr Carlsbad, CA 92008-4602						
		How long employed to	here? 12 yea	ars					
Pai	Give Details About Mont	thly Income							
	mate monthly income as of the dat ss you are separated.	te you file this form. If y	ou have nothing to re	port for an	y line	e, write \$0 in th	space. Inc	clude your non-fili	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		bine the information f	or all emplo	oyers	for that perso	on the line	es below. If you no	eed more
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	7,025.	20 \$	N/A	_
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.	<u>00 </u> +\$	N/A	_
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	7,025.20	_ \$	N/A	

Official Form 106l Schedule I: Your Income page 1

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			For	Debtor 1	For D	ebtor 2 or
			1 01	Desitor 1		iling spouse
Сору	line 4 here	4.	\$	7,025.20	\$	N/A
List a	all payroll deductions:					
5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,081.04	\$	N/A
5b.	Mandatory contributions for retirement plans	5b.	· · —	0.00	<u>\$</u> —	N/A
5c.	Voluntary contributions for retirement plans	5c.	· · · · ·	0.00	\$	N/A
5d.	Required repayments of retirement fund loans	5d.	· · · · —	0.00	\$	N/A
5e.	Insurance	5e.	\$_	0.00	\$	N/A
5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
5g.	Union dues	5g.	\$	0.00	\$	N/A
5h.	Other deductions. Specify: OASDI	5h.		410.65	+ \$	N/A
	New York paid family leave- NYPFL	_	\$	10.75	\$	N/A
	NY SDI - NYSDI	_	\$_	2.60	\$	N/A
	401K - EE Pre Tax	_	\$_	281.02	\$	N/A
	Dental Insurance Premium - EE Pre Tax		\$	20.06	\$	N/A
	FSA Health Care - EE Pre Tax		\$	125.00	\$	N/A
	Health Insurance Premium - EE Pre Tax		\$_	266.59	\$	N/A
	Vision Insurance Premium - EE Pre Tax		\$	3.14	\$	N/A
			\$	0.00	\$	N/A
Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,200.85	\$	N/A
Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	4,824.35	\$	N/A
8a. 8b.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a. 8b.		0.00	\$	N/A N/A
8c.	Family support payments that you, a non-filing spouse, or a dependent	OD.	Ψ_	0.00	Ψ	IN/A
00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	600.00	\$	N/A
8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A
8e.	Social Security	8e.	\$_	0.00	\$	N/A
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A
8h.	Other monthly income. Specify:	8h.	+ \$_	0.00	+ \$	N/A
Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	600.00	\$	N/A
	ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	5	5,424.35 + \$		N/A = \$5,42
Include other	e all other regular contributions to the expenses that you list in Schedule. de contributions from an unmarried partner, members of your household, your de friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availify:	epende				le J. 11. +\$(
	the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					Combined
Do y	ou expect an increase or decrease within the year after you file this form? No.	•				monthly inco

Official Form 106l Schedule I: Your Income page 2

Fill in	this informa	tion to identify you	ır cas <u>e:</u>			I			
Debtor	r 1	Kinga Paulina		ch			eck if this is An amend	ded filing	
Debtor (Spous	r 2 se, if filing)					-			ng postpetition chapter 13 ollowing date:
United	States Bankr	uptcy Court for the:	DISTRIC DIVISION	T OF NEW JERSEY, NE	WARK		MM / DD	/ YYYY	
Case n	number wn)								
Offi	icial Fo	rm 106J		-		J			
Sch	nedule	J: Your E	xpens	ses					12/1
inforn	nation. If m		ded, attach	two married people are another sheet to this fo					upplying correct r name and case numbe
Part 1	Descr s this a join	ibe Your Househ t case?	old						
_	■ No. Go to	line 2. s Debtor 2 live in	a separate	e household?					
	□ N □ Y		file Officia	Form 106J-2, Expenses	for Separate Housel	holdof Deb	tor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Do Debtor 2.	ebtor 1 and	YAS	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Deper age	ndent's	Does dependent live with you?
	Do not state dependents				Daughter		19		□ No ■ Yes
					Daughter		17		□ No ■ Yes
					son		10		□ No ■ Yes □ No
					son		5		■ Yes
e	expenses of	enses include people other that your dependen		•					
exper	ate your ex		ır bankrup	Expenses tcy filing date unless you is filed. If this is a supple					
value		sistance and hav		vernment assistance if it on Schedule I: Your I				Your expe	nses
		r home ownershid any rent for the g		es for your residence. In t.	clude first mortgage	4.	\$		2,473.25
li	f not includ	ed in line 4:							
4	4a. Real e	state taxes				4a.	\$		0.00
4	•	ty, homeowner's,				4b.	· —		0.00
		maintenance, rep				4c.	·		100.00
		owner's association		minium dues r residence, such as hon	ne equity loans	4d. 5.	·		0.00
U. F		igage payillel	you	Journaline, Julii as 11011	io oquity locallo	J.	Ψ		U.UU

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Debtor 1 Snia	dach, Kinga Paulina C	ase num	ber (if known)	
6. Utilities:				
	icity, heat, natural gas	6a.	\$	245.00
	r, sewer, garbage collection	6b.	\$	175.00
	hone, cell phone, Internet, satellite, and cable services	6c.	\$	490.00
	. Specify:	6d.	·	0.00
	ousekeeping supplies	- 7.	·	750.00
	nd children's education costs	8.	\$	
			•	175.00
-	undry, and dry cleaning	9.	\$	150.00
	re products and services	10.	\$	100.00
	d dental expenses	11.	\$	50.00
	tion. Include gas, maintenance, bus or train fare. de car payments.	12.	\$	200.00
	ent, clubs, recreation, newspapers, magazines, and books	13.		30.00
	contributions and religious donations	14.		20.00
5. Insurance.	contributions and religious dollations	14.	Ψ	20.00
	de insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in		15a.	\$	0.00
15b. Health		15b.	·	0.00
15c. Vehicl		15c.	·	96.00
	insurance. Specify:	15d.	·	
	ot include taxes deducted from your pay or included in lines 4 or 20.	_ 130.	Ψ	0.00
Specify:	, , ,	16.	\$	0.00
	or lease payments: ayments for Vehicle 1	17a.	¢	250.40
			·	350.10
•	ayments for Vehicle 2	17b.	·	0.00
17c. Other		_ 17c.	·	0.00
17d. Other.		17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report as om your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ents you make to support others who do not live with you.	10.	\$	0.00
Specify:	ionio you make to support outers who do not live with you.	19.	Ψ	0.00
	property expenses not included in lines 4 or 5 of this form or on Schedule	_	r Income	
	ages on other property	20a.		0.00
20b. Real e		20b.		0.00
	rty, homeowner's, or renter's insurance	20c.	·	0.00
	enance, repair, and upkeep expenses	20d.		0.00
	owner's association or condominium dues	20a.	·	
		206.	·	0.00
1. Other: Spec	шу.	_ 21.	+4	0.00
2. Calculate ye	our monthly expenses			
22a. Add line	es 4 through 21.		\$	5,404.35
22b. Copy lii	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	22a and 22b. The result is your monthly expenses.		\$	5,404.35
				3,404.33
•	our monthly net income.		_	
	line 12 (your combined monthly income) from Schedule I.	23a.	·	5,424.35
23b. Copy	your monthly expenses from line 22c above.	23b.	-\$	5,404.35
23c. Subtra	act your monthly expenses from your monthly income.			
	esult is your monthly net income.	23c.	\$	20.00
For example,	ect an increase or decrease in your expenses within the year after you fi do you expect to finish paying for your car loan within the year or do you expect your mo the terms of your mortgage?			or decrease because of
☐ Yes.	Explain here:			

modification to the t	enns of your mortgage:
■ No.	
☐ Yes.	Explain here:

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					•	
Fill in this in	formation to identify yo	our case:				
Debtor 1	Kinga Paulina Sr	niadach				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JE	RSEY, NEWARK DIVIS	ION		
Case number _ (if known)					☐ Check if this is an amended filing	
Official Form		an Individual	l Dabtaria S	ahadulaa		
Declarat	ion About a	an Individual	Deptor S 3	cneaules	12/1	5
obtaining money years, or both. 18		connection with a bank			ment, concealing property, or), or imprisonment for up to 20	
Did you pay	y or agree to pay some	one who is NOT an attorr	ney to help you fill out	bankruptcy forms?		
■ No						
☐ Yes. N	lame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)	
	ty of perjury, I declare to true and correct.	that I have read the sumr	mary and schedules file	ed with this declaratio	n and	
X /s/ King	ga P. Sniadach		X			
Kinga	Paulina Sniadach re of Debtor 1		Signature	of Debtor 2		

Date August 6, 2019

Date

Case	e 19-25244-SLM	Doc 1 Filed 0	8/06/19 ent Pa	Entered 08/06/19 ge 27 of 42	17:54:09	Desc Main
Fill in th	his information to identif					
Debtor 1	Kinga Paulina Sn	iadach				
	First Name	Middle Name	Last	Name	_)	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last	Name	_	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, NEW	ARK DIVISION	_	
Case number						
(if known)						Check if this is an amended filing
						_
Official Fo	orm 106Sum					
Summary of	of Your Assets a	and Liabilities ar	nd Certai	n Statistical Infor	mation	12/15
information. Fill	•	s first; then complete the	e information	ether, both are equally resp on this form. If you are filing e top of this page.		

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 312,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 144,640.00 1c. Copy line 63, Total of all property on Schedule A/B..... 456,640.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 319,132.00 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F...... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F..... 95,758.00 Your total liabilities 414,890.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income(Official Form 106I) 5.424.35 Copy your combined monthly income from line 12 oSchedule I..... Schedule J: Your Expenses (Official Form 106J) 5,404.35 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

7

Summary of Your Assets and Liabilities and Certain Statistical Information

purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

What kind of debt do you have?

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,625.20 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: 9.

From Bort 4 on Colombia E/E against a fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in <u>thi</u>	s information to identi	fy your case:			
Debtor 1	Kinga Paulina S				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY, NEWARK DIVISION		
	. ,	_			
Case number _ (if known)				_	Check if this is an amended filing
	of Financial	Affairs for Individ		sankruptcy	4/19
(if known). Answ Part 1: Give I 1. What is you Married Not ma	er every question. Details About Your Ma r current marital statu rried	rital Status and Where You	Lived Before	additional pages, write your	name and case number
□ No					
Yes. Lis	st all of the places you live	ved in the last 3 years. Do not i	nclude where you live now.		
Debtor 1 Pr	ior Address:	Dates Debtor 1 I	lived Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
25 South Morris Pla	wood Dr ains, NJ 07950-152	From-To: 2007 - 2018	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and territori No Yes. Ma	es include Árizona, Cal	ifornia, Idaho, Louisiana, Nevi	ada, New Mexico, Puerto Ri	ty property state or territory co, Texas, Washington and Wi	
Fill in the total If you are filing No	al amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	Il businesses, including part-		dar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$50,428.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

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Case number (if known) Debtor 1 Sniadach, Kinga Paulina

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2018) For the calendar year before that: (January 1 to December 31, 2017) 5. Did you receive any other inc Include income regardless of whother public benefit payments; pyou are filing a joint case and you List each source and the gross i No Yes. Fill in the details.		31, 2018)	■ Wages, commissions, bonuses, tips	\$77,984.00	Wages, commission bonuses, tips		
				☐ Operating a business		☐ Operating a	business	
				■ Wages, commissions, bonuses, tips	\$77,107.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	you are filin	ng a joint ca	se and you ha	ve income that you received too	gether, list it only once under	Debtor 1.	J	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.	ome	Gross income (before deductions and exclusions)
	r last calen inuary 1 to		31, 2018)	401K withdrawal	\$124,329.00			
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for B	sankruptcy			
6.	Are either ☐ No.	Neither De	ebtor 1 nor D	s debts primarily consumer of ebtor 2 has primarily consur personal, family, or household p	mer debts. Consumer debts	are defined in 11 U	.S.C. § 101(8) as "incurred by an
		During the	90 days befor	re you filed for bankruptcy, did	you pay any creditor a total of	\$6,825* or more?		
		□ Yes	List below e creditor. Do	ach creditor to whom you paid not include payments for don o an attorney for this bankruptc	nestic support obligations, so			
		* Subject		on 4/01/22 and every 3 years a		after the date of ad	justment.	
	Yes.			r both have primarily consur re you filed for bankruptcy, did		\$600 or more?		
		■ No.	Go to line 7					
		□ _{Yes}		ach creditor to whom you paid or domestic support obligations otcy case.				
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for

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Debtor 1 Sniadach, Kinga Paulina

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment				
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosig		ments or transfer ar	y property on ac	count of a debt	that benefited an				
	No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor					
Pa	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures								
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes. No Yes. Fill in the details.	ases, small claims actions,	divorces, collection s		ns, support or cu	stody modifications,				
	Case title Case number	Nature of the case	Court or agency		Status of the	case				
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. ☐ Yes. Fill in the information below.		erty repossessed, fo	reclosed, garnish	ed, attached, se	ized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happened	d			property				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	use you owed a debt?								
	Creditor Name and Address	Describe the action the	e creditor took	taken	action was	Amount				
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar ■ No □ Yes		erty in the possessio	on of an assignee	for the benefit c	of creditors, a				
Pa	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts	s with a total value o	f more than \$600	per person?					
	Gifts with a total value of more than \$600 p person	per Describe the gifts		Dates the g	s you gave ifts	Value				
	Person to Whom You Gave the Gift and Address:									

Case 19-25244-SLM Doc 1 Filed 08/06/19 Entered 08/06/19 17:54:09 Page 32 of 42 Case number (if known) Document Debtor 1 Sniadach, Kinga Paulina 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of **Address** transferred transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Offices of Steven A. Serna, LLC **Legal Fees** 4/27/19 \$2,200.00 5300 Bergenline Ave Ste 300 West New York, NJ 07093-5616 001 Debtorcc.Inc Credit counseling 4/29/19 \$14.95 378 Summit Ave Jersey City, NJ 07306-3110 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. Person Who Was Paid Date payment or Description and value of any property Amount of Address transferred transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was

Address

payments received or debts

paid in exchange

property transferred

made

Person's relationship to you

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Debtor 1 Sniadach, Kinga Paulina

Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you John DiDomenico Sr. & Gloria Sold 25 Southwood Dr. 50/50 split of \$66,252 5/5/2018 **DiDomenico** Morris Plains, NJ with net gain from closing plus equitable 25 Southwood Dr ex-domestic partner to his Morris Plains, NJ 07950-1525 parents for \$500,000 distribution payment to total \$50,000 paid to Ex-In-laws debtor Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance before Date account was closed, sold, Address (Number, Street, City, State and ZIP account number instrument closing or transfer Code) moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Do you still Who else had access to it? Describe the contents Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State have it? and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value

(Number, Street, City, State and ZIP

Code)

Address (Number, Street, City, State and ZIP Code)

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Debtor 1 Sniadach, Kinga Paulina

Part 10: Give Details About Environmental Information

☐ Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Name of site

Environmental law, if you

Do not include Social Security number or ITIN.

Dates business existed

know it

For	the purpose of Part 10, the following definitions a	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air controlling the cleanup of these substances, wa	r, land, soil, surface water, groundwate	•						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmenterial, pollutant, contaminant, or similar term.		ste, hazardous substance, toxic sub	stance, hazardous					
Rep	oort all notices, releases, and proceedings that yo	u know about, regardless of when the	y occurred.						
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable und	der or in violation of an environmen	tal law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No								

26. Hav	e you been a p	party in an	/ judicial or	administrative	proceeding	under any	y environmental	law? Include	settlements	and orders
---------	----------------	-------------	---------------	----------------	------------	-----------	-----------------	--------------	-------------	------------

Governmental unit

ZIP Code)

■ No			
☐ Yes. Fill in the details.			
Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

Address (Number, Street, City, State and

Pa	rt 11: Give Details About Your Business or	Connections to Any Business						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any busi A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
☐ An owner of at least 5% of the voting or equity securities of a corporation								
■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.								
								Business Name

Name of accountant or bookkeeper

Address

Date of notice

(Number, Street, City, State and ZIP Code)

Case 19-25244-SLM Doc 1 Filed 08/06/19 Entered 08/06/19 17:54:09 Page 35 of 42 Case number (if known) Document Debtor 1 Sniadach, Kinga Paulina Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kinga P. Sniadach Signature of Debtor 2 Kinga Paulina Sniadach Signature of Debtor 1 Date August 6, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 19-25244-SLM Doc 1 Filed 08/06/19 Entered 08/06/19 17:54:09 Desc Main Document Page 36 of 42 United States Bankruptcy Court District of New Jersey, Newark Division

IN RE:		Case No.
Sniadach, Kinga Paulina		Chapter 7
· •	Debtor(s)	·
	VERIFICATION OF CREDITOR MAT	ΓRIX
The above named debtor(s) hereby ve	erify(ies) that the attached matrix listing credi	tors is true to the best of my(our) knowledge.
Date: August 6, 2019	Signature: /s/ Kinga P. Sniadach	
	Kinga P. Sniadach	Debtor
Date:	Signature:	
		Joint Debtor, if any

Bank of America 4909 Savarese Cir Tampa, FL 33634-2413

Chase Card Attn: Legal Dept 1455 Valley Rd Wayne, NJ 07470-2089

Ford Motor Credit Comp PO Box 542000 Omaha, NE 68154-8000

Loancare Servicing Ctr Attn: Bankruptcy 780 Lynnhaven Pkwy Ste 375 Virginia Beach, VA 23452-7332

Syncb/tjx Cos Dc Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

TD Bank N.A. 32 Chestnut St Lewiston, ME 04240-7744 Valley National Bank Attn: Legal Dept 1455 Valley Rd Wayne, NJ 07470-2089

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Fill in this inform	nation to identify your case:		Ch	eck one box only	as directed in this form a	and in Form
Debtor 1	Kinga Paulina Sniadach		122	2A-1Supp:		
Debtor 2				4 Thomasia na		
(Spouse, if filing)			1 1 .		presumption of abuse	
United States E	District of New Jer Bankruptcy Court for the: Division	rsey, Newark	'	applies will	tion to determine if a pre be made underChapter (Official Form 122A-2).	•
Case number (if known)					Test does not apply now vice but it could apply late	
				☐ Check if this	s is an amended filing	
Official F	<u>orm 122A - 1</u>					
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	ome		12/15
a separate sheet number (if knowi military service,	and accurate as possible. If two married people a to this form. Include the line number to which the n). If you believe that you are exempted from a p complete and file Statement of Exemption from Iculate Your Current Monthly Income	ne additional infor resumption of ab	mation applies. use because you	On the top of any and the do not have prim	additional pages, write yo arily consumer debts or b	ur name and case ecause of qualifying
1. What is y	our marital and filing status? Check one on	ly.				
■ Not ma	arried. Fill out Column A, lines 2-11.					
	d and your spouse is filing with you. Fill ou	it both Columns	A and B, lines 2	2-11.		
☐ Marrie	d and your spouse is NOT filing with you.	You and your s	pouse are:			
☐ Livi	ng in the same household and are not lega	Ily separated. F	ill out both Colu	ımns A and B, line	es 2-11.	
per	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are legalty for reasons that do not include evading the N	ally separated ur	nder nonbankrup	otcy law that applic	es or that you and your sp	
101(10A). For 6 months, add	erage monthly income that you received from all example, if you are filing on September 15, the 6-m the income for all 6 months and divide the total by rental property, put the income from that property in	nonth period would 6. Fill in the result.	be March 1 throu Do not include ar	igh August 31. If the ny income amount n	e amount of your monthly incomore than once. For example	come varied during the
				Column A Debtor 1	Column B Debtor 2 or non-filing spous	е
Your gros payroll dec	ss wages, salary, tips, bonuses, overtime, a	and commission	ns (before all	\$ 7,025.2	20 \$	
3. Alimony	and maintenance payments. Do not include is filled in.	payments from a	a spouse if	\$ 600.	<u> </u>	_
of you or from an ui roommate	nts from any source which are regularly pa your dependents, including child support. married partner, members of your household, is. Include regular contributions from a spous- clude payments you listed on line 3	Include regular your dependents	contributions , parents, and	 \$ 0. !	00 \$	
5. Net incom	ne from operating a business, profession,					_
			otor 1			
	eipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>				
•	and necessary operating expenses		Copy here ->	\$ 0.0	00 \$	
	nly income from a business, profession, or far ne from rental and other real property	m \$	oopy nere >	<u> </u>	<u>σσ</u>	<u>—</u>
o. Net mcon	ne nom remai and other real property	Dek	otor 1			
Gross rec	eipts (before all deductions)	\$ 0.00				
	and necessary operating expenses	-\$ 0.00				
-	nly income from rental or other real property	\$ 0.00	Copy here ->	\$	00 \$	
	dividends, and royalties			\$ 0.0	00 \$	

Official Form 122A-1

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Debtor 1 Document Page 40 of 42

Sniadach, Kinga Paulina Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or		
				Deptor 1		non-filing sp	oouse	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount r Social Security Act. Instead, list it here:	eceived was a benef	it under the	е				
	For you \$	·	0.00					
	For your spouse \$	·						
	Pension or retirement income. Do not include any amounder the Social Security Act.			\$	0.00	\$,
10.	Income from all other sources not listed above. Spe not include any benefits received under the Social Securia victim of a war crime, a crime against humanity, or intel if necessary, list other sources on a separate page and p	ty Act or payments r rnational or domestic out the total below.	eceived as	;	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.			. \$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	7,625.20	+ [\$		Total c	7,625.20
Part	2: Determine Whether the Means Test Applies to	You						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сору	line 11 h	ere=>	\$	7,625.20
	Multiply by 12 (the number of months in a year)						x 1	12
	12b. The result is your annual income for this part of the	form				12b.	\$\$	91,502.40
13.	Calculate the median family income that applies to y	ou. Follow these ste	eps:				L	
	Fill in the state in which you live.	NJ						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link	specified	in the separat	e instruction	13. ons for this	\$12	25,465.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O	n the top of page 1,	check box	κ 1T,here is no p	resumptio	n of abuse.		
	Go to Part 3. 14b. Line 12b is more than line 13. On the top of	of page 1, check box	x 2T,he pres	sumption of ab	use is dete	ermined by For	m 122A-	-2.
Dort	Go to Part 3 and fill out Form 122A-2. 3: Sign Below							
Part	By signing here, I declare under penalty of perjury the	ast the information o	n this state	ment and in ar	v attachm	ente ie true an	d correct	•
		iai ine iniormation o	ii tiiis state	and in a	iy allaciiii	ents is true an	u coneci	•
	X /s/ Kinga P. Sniadach Kinga Paulina Sniadach							
	Signature of Debtor 1							
	Date August 6, 2019 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Certificate Number: 15725-NJ-CC-032742441



CERTIFICATE OF COUNSELING

I CERTIFY that on April 29, 2019, at 7:44 o'clock PM EDT, Kinga Sniadach received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 29, 2019 By: /s/Alexis Preza-Alva

Name: Alexis Preza-Alva

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey, Newark Division

In re	Sniadach, Kinga Paulina		Case N		
		Debtor(s)	Chapte	r <u>7</u>	
	DISCLOSURE OF COMPE	NSATION OF ATTO	ORNEY FOR	DEBTOR	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankrupto	y, or agreed to be	paid to me, for services	
	For legal services, I have agreed to accept		\$	2,200.00	
	Prior to the filing of this statement I have received		\$	2,200.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe firm.	ensation with any other perso	n unless they are	nembers and associates	s of my law
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				y law firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspe	cts of the bankrup	tcy case, including:	
1	a. Analysis of the debtor's financial situation, and render of the Department of the debtor at the meeting of creditor of the debtor's financial situation, and render of the debtor at the meeting of creditor of the debtor of the debtor at the meeting of creditor of the debtor of the debtor at the meeting of creditor of the debtor of the debtor at the meeting of creditor of the debtor of the debt	ment of affairs and plan which	ch may be require	l;	.nkruptcy;
6. I	By agreement with the debtor(s), the above-disclosed fee	does not include the followi	ng service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement f	or payment to me	for representation of th	e debtor(s) in
Α	ugust 6, 2019	/s/ Steven A. Ser	na		
D	ate	Steven A. Serna Signature of Attorn			
		Law Offices of S		LLC	
		5300 Bergenline West New York, (201) 392-0303 bk@sernaesg.cc	NJ 07093-5616 Fax: (201) 392-0	323	
		Name of law firm	-		